

DIRECT PAYMENT APPLICATION

City of North Sioux City
504 River Drive
North Sioux City, SD 57049
Phone (605) 232-4276 Fax (605) 232-0506

How the Direct Payment Plan Works:

Payments are made through a preauthorized transfer. The authority you give to the City to charge your account will remain in effect until you notify the City *in writing* to terminate the authorization.

You authorize regularly scheduled payments to be withdrawn, from your checking or savings account, on the 10th of each month, prior to the due date. Proof of payment will appear on your next statement.

				(PLEASE	PRINT)					
NAME:										
SERVICE ADDRESS:										
MAILING ADDRESS:										
CITY:	STATE/ZIP:									
PHONE NUMBER:	HOME _		CELL	WOR	WORK					
BANK NAME:										
BRANCH:										
STREET ADDRESS:	-									
CITY:	STATE/ZIP:									
				<u> </u>				1		1 1
ROUTING NUMBER (9			· · · ·		.1		1			
The routing number is	round at tr	ie bottom iet T	t of your ci	песк ретwe	en tnese sy	mbols :	Ι:			
ACCOUNT NUMBER:		Checking	Savir							
The account number immediately follows the routing number. Please do NOT include the check number.										
PLACE VOIDED CHECK HERE										
TEACL VOIDED CHECK HERE										
I authorize the City of North Sioux City, and the financial institution named above, to initiate entries to the checking/savings account listed above. This authority will remain in effect until I notify the City of North Sioux City <i>in writing</i> to cancel it in such a time as to afford the City and the financial institution a reasonable opportunity to act on my request.										
SIGNATURE:						DAT	E:			

CONTINUE TO PAY YOUR UTILITY BILL UNTIL YOUR BILL IS STAMPED "AUTOMATIC PAYMENT/KEEP FOR YOUR RECORDS."